

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		6	9-5-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim		Date	
Final	Original		
1	2		
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Claim		Date	
Final	Original		
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Claim		Date	
Final	Original		
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet her

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